

Application for Permit to Drill (APD)

1. PROPOSAL TO DRILL <input type="checkbox"/> NEW WELL <input type="checkbox"/> SIDETRACK <input type="checkbox"/> BYPASS <input type="checkbox"/> DEEPEN		2. MMS OPERATOR NO.	3. OPERATOR NAME and ADDRESS <i>(Submitting Office)</i>
4. WELL NAME <i>(Current)</i>	5. SIDETRACK NO. <i>(Current)</i>	6. BYPASS NO. <i>(Current)</i>	
7. PROPOSED START DATE	8. PLAN CONTROL NO. <i>(New Well Only)</i>		
9. API WELL NO. <i>(Current Sidetrack / Bypass) (12 Digits)</i>			

WELL AT TOTAL DEPTH (PROPOSED)		WELL AT SURFACE	
10. LEASE NO.	15. LEASE NO.		
11. AREA NAME	16. AREA NAME		
12. BLOCK NO.	17. BLOCK NO.		
13. LATITUDE <input type="checkbox"/> NAD 27 <i>(GOM & Pacific)</i> <input type="checkbox"/> NAD 83 <i>(Alaska)</i>	14. LONGITUDE <input type="checkbox"/> NAD 27 <i>(GOM & Pacific)</i> <input type="checkbox"/> NAD 83 <i>(Alaska)</i>	18. LATITUDE <input type="checkbox"/> NAD 27 <i>(GOM & Pacific)</i> <input type="checkbox"/> NAD 83 <i>(Alaska)</i>	19. LONGITUDE <input type="checkbox"/> NAD 27 <i>(GOM & Pacific)</i> <input type="checkbox"/> NAD 83 <i>(Alaska)</i>

LIST OF SIGNIFICANT MARKERS ANTICIPATED			
20. NAME	21. TOP <i>(MD)</i>	20. NAME	21. TOP <i>(MD)</i>

22. LIST ALL ATTACHMENTS *(Attach Complete Well Prognosis and Attachments Required by 30 CFR 250.414(B) through (G) or 30 CFR 250.1617(C) and (D), As Appropriate)*

23. AUTHORIZING OFFICIAL <i>(Type or Print Name)</i>	24. TITLE
25. AUTHORIZING SIGNATURE	26. DATE

THIS SPACE FOR MMS USE ONLY			
APPROVED: <input type="checkbox"/> With Attached Conditions <input type="checkbox"/> Without Conditions	BY	TITLE	DATE
API WELL NO. ASSIGNED TO THIS WELL			

PAPERWORK REDUCTION ACT OF 1995 (PRA) STATEMENT: The PRA (44 U.S.C. 3501 *et seq.*) Requires us to inform you that we collect this information to obtain knowledge of equipment and procedures to be used in drilling operations. MMS uses the information to evaluate and approve or disapprove the adequacy of the equipment and/or procedures to safely perform the proposed drilling operation. Responses are mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.196. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB Control Number. Public reporting burden for this form is estimated to average 2½ hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Mail Stop 4230, Minerals Management Service, 1849 C Street, N.W., Washington, DC 20240.